Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS ID PWS Name Cla					Population	Owner Type	Primary Source
CT1020092	1020092 TINACO PLAZA, LLC						Р	GW
Local Address (\	Service	Residen	ntial	Commercia	al Industri	al Combine	ed Agricultural	
273 CLARKS FAL	Connections			2				

Requirements		
00)		
	1 routine	(RT) per nine years
Monitoring Period	Collection Period	Compliance Status
1/1/11 - 12/31/19		
1/1/20 - 12/31/28		
	1 rout	ine (RT) per quarter
Monitoring Period	Collection Period	Compliance Status
10/1/18 - 12/31/18		Complete
1/1/19 - 3/31/19		Complete
4/1/19 - 6/30/19		
7/1/19 - 9/30/19		
	5 routine	(RT) per three years
Monitoring Period	Collection Period	Compliance Status
1/1/17 - 12/31/19	6/1-9/30	
1/1/20 - 12/31/22	6/1-9/30	
	1 rout	ine (RT) per quarter
Monitoring Period	Collection Period	Compliance Status
10/1/18 - 12/31/18		Complete
1/1/19 - 3/31/19		Complete
4/1/19 - 6/30/19		
7/1/19 - 9/30/19		
	1 routine	(RT) per three years
Monitoring Period	Collection Period	Compliance Status
1/1/17 - 12/31/19		
1/1/20 - 12/31/22		
	1 rc	outine (RT) per year
Monitoring Period	Collection Period	Compliance Status
1/1/18 - 12/31/18		Complete
1/1/19 - 12/31/19		·
1/1/20 - 12/31/20		
	1 routine	(RT) per three years
Monitoring Period	Collection Period	Compliance Status
		Complete
		P
, ,,,	1 rout	ine (RT) per quarter
Monitoring Period	Collection Period	Compliance Status
		Complete
		Complete
4/1/19 - 6/30/19		
	Monitoring Period 1/1/11 - 12/31/19 1/1/20 - 12/31/28 Monitoring Period 10/1/18 - 12/31/18 1/1/19 - 3/31/19 4/1/19 - 6/30/19 7/1/19 - 9/30/19 Monitoring Period 1/1/17 - 12/31/19 1/1/20 - 12/31/22 Monitoring Period 10/1/18 - 12/31/18 1/1/19 - 3/31/19 4/1/19 - 6/30/19 7/1/19 - 9/30/19 Monitoring Period 1/1/17 - 12/31/19 1/1/20 - 12/31/22 Monitoring Period 1/1/17 - 12/31/19 1/1/20 - 12/31/22 Monitoring Period 1/1/18 - 12/31/18 1/1/19 - 12/31/19 1/1/20 - 12/31/20 Monitoring Period 1/1/17 - 12/31/19 1/1/20 - 12/31/22 Monitoring Period 1/1/17 - 12/31/19 1/1/20 - 12/31/22	1 routine Monitoring Period 1/1/11 - 12/31/19 1/1/20 - 12/31/28 1 routine Monitoring Period 10/1/18 - 12/31/18 1/1/19 - 3/31/19 4/1/19 - 6/30/19 7/1/19 - 9/30/19 5 routine Monitoring Period 1/1/17 - 12/31/19 6/1-9/30 1 routine Monitoring Period 10/1/18 - 12/31/18 1/1/19 - 3/31/19 4/1/19 - 6/30/19 7/1/19 - 9/30/19 1 routine Monitoring Period 10/1/18 - 12/31/18 1/1/19 - 9/30/19 7/1/19 - 9/30/19 1 routine Monitoring Period 1/1/17 - 12/31/19 1/1/20 - 12/31/22 1 routine Monitoring Period 1/1/18 - 12/31/18 1/1/19 - 12/31/19 1/1/20 - 12/31/20 1 routine Monitoring Period 1/1/17 - 12/31/19 1/1/20 - 12/31/20 1 routine Monitoring Period 1/1/17 - 12/31/19 1/1/20 - 12/31/20 1 routine Monitoring Period 1/1/17 - 12/31/19 1/1/20 - 12/31/20 1 routine Collection Period 1/1/17 - 12/31/19 1/1/20 - 12/31/20 1 routine Collection Period 1/1/17 - 12/31/19 1/1/20 - 12/31/22 1 routine Collection Period Collection Period 1/1/17 - 12/31/19 1/1/20 - 12/31/19

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Connecticut De	partment	t of Public H	ealth I	Orinking	g Wa	ter S	Section	
	Water Oi	ıalitv Mo	nitoring and	d Comr	oliance	Sche	dule		
PWS ID	PWS Name	<i>J</i>	<u> </u>		lassification				rimary Source
CT102009	2 TINACO PLAZA, LLC				NTNC	25		Р	GW
Local Add	ress (where applicable)		Service	Residentia	l Commerc	ial Ind	ustrial	Combined	Agricultural
273 CLAR	KS FALLS ROAD		Connections		2				
Towns Sei	rved: NORTH STONINGTON								
		Othe	er Compliance	Schedu	les				
Complian	ce Schedule Activity			Du	e Date	A	Achieve	d Date	
CROSS CO	NNECTION SURVEY REPORT			3/:	1/2019				
		Public	Notification R	equiren	nents				
			Compliance	Notice	<u>Public N</u>	otificat	<u>ion</u>	PN Cert	<u>ification</u>
Violation,	/Situation	Period	Tier	Required	Perf	ormed	Due to DPH	Received	
Organic C	hemicals M&R Violation		4/1/18 - 6/30/18	3	8/27/2019			9/6/2019	
	Water	System Fa	acility and San	npling P	oint Inve	entory	/		
Water							Lead an		
System	Water System Facility	Sampling P ID	Point Sampling Poil Description	nt		-	Coppe		Stage
Facility ID 00500	BETWEEN GAC FILTERS	טו	Description		Status	Rule	Kule III	er Asbesios	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	LCVCTENA	A	Υ			
00000	DISTRIBUTION STSTEIN		EAM WITHIN 5 SER		A	ī			
		MW00:		MENS ROOM		Υ	3	Υ	
		MW002				Y	3	Ү	
		MW003	_	HAND WASH SINK		Y	3	Ү	
		MW004			A A	Υ	3	Y	
		MW00!	5 WOMANS RO	ОМ	Α	Υ	3	Υ	
		MW006	6 HAND WASH	SINK 2	Α	Υ	3	Υ	
		MW00	7 PREP SINK		Α		3	Υ	
		MW008	8 ISLAND SINK 1	_	Α	Υ	3	Υ	
		MW009	9 ISLAND SINK 2	2	Α	Υ	3	Υ	
		UPSTREA	M WITHIN 5 SER	VICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT		Α				
1037	TINACO PLAZA TREATMENT STATION								
10777	WELL 1	2	WELL 1		Α				
53847	ATMOSPHERIC TANK								
53849	BLADDER TANK								
53851	PUMP STATION								
		Certif	ied Operator I	nforma	tion				

Water System Facility: TINACO PLAZA TREATMENT STATION (WSF ID: 1037) Facility Classification: CLASS 2 TREATMENT PLANT Certification Certification(s) **Expiration Operator Name Operator Type** LAFRAMBOISE, PAUL F. **CHIEF OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS I** 9/30/2021 WATER TREATMENT PLANT OPERATOR - CLASS II 9/30/2021 SCOTT, ROBERT G. **ASSIGNED OPERATOR** WATER TREATMENT PLANT OPERATOR - CLASS I 6/30/2020

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

					1			
PWS ID	PWS Name				Classification	Population	Owner Type	Primary Source
CT1020092	TINACO PLAZA, LLC				NTNC	25	Р	GW
Local Address (v	vhere applicable)		Service	Residen	tial Commerci	al Industri	al Combine	ed Agricultural
273 CLARKS FAL	LS ROAD		Connections		2			

Towns Served: NORTH STONINGTON

			Co	ontact Info	ormation					
Name				Organization	1		Job Title			
Mr. Stephen Chero	niak			Water's Edge	e Resort	Water Quality Specia				
Mailing Address Lin	e One		Mailing Addr	ess Line Two		City State Zip				
1525 Boston Post R	d					PO Box 6	588	СТ	06498	
Business Phone	Extension	Fax	Mo	bile Phone	Emergency Phone	Email Ad	ddress			
860-399-5901	4010		203	3-305-3747		scherhoniak@watersedgeresortandspa.com				
Contact Role(s): A	dministrative	Contact, Leg	al Contact							

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name C					ssification	Population	Owner Type	Primary Source
CT1021031 NORTH STONINGTON CHRISTIAN ACADEMY					NTNC	78	Р	GW
Local Address (v	Service	Residential		Commerci	al Industri	al Combine	ed Agricultural	
12 STILLMAN RO	Connections	1						

Towns Served: NORTH STONINGTON			
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006)	00)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/18 - 11/30/18		Complete
	12/1/18 - 12/31/18		Complete
	1/1/19 - 1/31/19		Complete
	2/1/19 - 2/28/19		Complete
	3/1/19 - 3/31/19		Complete
	4/1/19 - 4/30/19		
	5/1/19 - 5/31/19		
	6/1/19 - 6/30/19		
	7/1/19 - 7/31/19		
	8/1/19 - 8/31/19		
	9/1/19 - 9/30/19		
	10/1/19 - 10/31/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/17 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/22	6/1-9/30	
Physical Parameters (PPS)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/18 - 11/30/18		Complete
	12/1/18 - 12/31/18		Complete
	1/1/19 - 1/31/19		Complete
	2/1/19 - 2/28/19		Complete
	3/1/19 - 3/31/19		Complete
	4/1/19 - 4/30/19		
	5/1/19 - 5/31/19		
	6/1/19 - 6/30/19		
	7/1/19 - 7/31/19		
	8/1/19 - 8/31/19		
	9/1/19 - 9/30/19		
	10/1/19 - 10/31/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/20		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule										
PWS ID	PWS Name		Cla	lassification Population		Owner Type	Primary Source				
CT1021031	NORTH STONINGTON CHRISTIAN ACADEMY				NTNC	78	Р	GW			
Local Address (where applicable) Service				tial	Commercia	al Industri	al Combine	ed Agricultural			
12 STILLMAN RO)AD	Connections	1								

Towns Served: NORTH STONINGTON

owns Served: NORTH STONINGTON			
Monitorin	g Requirements		
Vater System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
	1/1/21 - 12/31/23		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/20		
	1/1/21 - 12/31/23		
Vater System Facility: WELL (WSF ID: 10486)			
E. Coli (3014)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL (2)	11/1/18 - 11/30/18		Complete
	12/1/18 - 12/31/18		Complete
	1/1/19 - 1/31/19		Complete
	2/1/19 - 2/28/19	_	Complete
	3/1/19 - 3/31/19		Complete
	4/1/19 - 4/30/19		·
	5/1/19 - 5/31/19		
	6/1/19 - 6/30/19		
	7/1/19 - 7/31/19		
	8/1/19 - 8/31/19		
	9/1/19 - 9/30/19		

Monthly Water System Facility (WSF) Level Monitoring Requirements

	Conne	ecticut Depa	artment of	Public H	lealth D	rink	ing W	ater Se	ction		
		Water Qua	lity Monit	oring an	d Comp	lianc	e Sch	edule			
PWS ID	PWS Nan					assificat		lation Ow	ner Type P	rimary So	ource
CT102103	NORTH S	TONINGTON CHRI	STIAN ACADEMY			NTNC	7	78	Р	GW	
Local Add	ress (where app	licable)		Service	Residential	Comm	nercial I	ndustrial	Combined	Agricul	tura
12 STILLM	1AN ROAD			Connections	1						
Towns Ser	rved: NORTH STO	ONINGTON									
Water Sy	stem Facility:	ENTRY POINT (V	VSFID: 00700)								
Analy	te	Monitoring Requ	uirement (Summ	ary Type)	Operat	ing Limi	t		Samples R	eq/Mont	th
рН		Entry Point pH M	Ionitoring (PHRD	•	Minimu		PH		4	1	
Start [Date: 1/1/2002			-	ance History	:	Operati	ng Limit	Monito		
					ring Period		Complia	nce Status	: Complia	nce Stat	us:
					18 - 11/30/2					N	
					18 - 12/31/2					N	
					9 - 1/31/201					N	
					9 - 2/28/201					N	
					9 - 3/31/201 9 - 4/30/201						
			Othor C								
C!:	an Calmadala Anti		Other C	ompliance				A alata card	Deste		
	ce Schedule Acti					Date		Achieved	Date		
CROSS CO	NNECTION SURV					/2020					
		water S	ystem Facili	ity and Sai	npling Po	oint ir	ivento				
Water	Mater Custom	Eacility	Sampling Point	Camplina Boi	int		Total	Lead and		C	4
System Facility ID	Water System	racinty	ID	Description	TIL .	Charles	Coliform Rule		Asbestos		tage DRP
00600	DISTRIBUTION	SYSTEM	4	DISTRIBUTIO	N SYSTEM	Status A	Y	11010 1101	71000000		
00000	DISTRIBUTION	31312141	4-1	KITCHEN SINI		A	Y	2	Υ		
			4-2	BOYS BATHRO		Α	Y	2	·		
			4-3	GIRLS BATHR		Α	Y	2			
			4-4	KITCHEN SINI		Α	Υ	2			
			4-5	BOYS BATHRO	OOM 2	Α	Υ	2			
			DOWNSTREAM	WITHIN 5 SEF	RVICE CON	Α					
			UPSTREAM	WITHIN 5 SEF	RVICE CON	Α					
00700	ENTRY POINT		3	ENTRY POINT		Α					
10486	WELL		2	WELL		Α					
46442	NORTH STONIN	IGTON CHRISTIAN									
49238	PRESSURE STO	RAGE TANK									
			Certified	Operator	Informat	ion					
Water Sy	stem Facility:	DISTRIBUTION S	YSTEM (WSF I	D: 00600)							
Facility Cl	assification: SM	ALL WATER SYSTE	M							Certifica	ition
Operator	Name		Operator Type								tion
WILKINSO	N, PAMELA B.		CHIEF OPERATO	OR SI	MALL WATER	SYSTEN	/I OPERAT	OR CONDIT	TONAL	6/30/2	020

Contact Information Organization Name Job Title Ms. Pamela B. Wilkinson N Stonington Christian Academy Director Mailing Address Line One Mailing Address Line Two City State Zip Code 12 Stillman Road North Stonington CT 06359

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Connecticut Department of Fublic Health Drinking Water Section										
Water Quality Monitoring and Compliance Schedule											
PWS ID	PWS Name						sification	Population	Owner Type	Primary Source	
CT1021031	NORTH STONING	GTON CHRISTIAN AC			ı	NTNC	78	Р	GW		
Local Address (w	here applicable)			Service	Resider	itial	Commerci	al Industri	al Combine	ed Agricultural	
12 STILLMAN RO	AD			Connection	s 1						
Towns Served: N	ORTH STONINGT	ON									
Business Phone	Business Phone Extension Fax Mobile Phone Emergency Phone Email Address										
860-599-5071	60-599-5071 860-599-2815 860-599-3552 NSCAPBW@sbcglobal.net										

Connecticut Department of Public Health Drinking Water Section

Contact Role(s): Administrative Contact, Legal Contact, Owner

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

		<u> </u>		<u> </u>			
PWS ID	PWS Name		(Classification	Population	Owner Type	Primary Source
CT1020254	WOOD POND (WEST 1&2)			NTNC	70	Р	GW
Local Address (v	here applicable)	Service	Residenti	al Commerci	al Industri	al Combine	ed Agricultural
ROUTE 184		Connections		1			

Towns Served: NORTH STONINGTON			l
Monitoring	g Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	500)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		Complete
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/18	6/1-9/30	Complete
Lead And Copper (PBCU)		5 routine	(RT) per six months
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/19 - 6/30/19		
	7/1/19 - 12/31/19		
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		Complete
	7/1/19 - 9/30/19		
Water Quality Parameters (WQPD)		2 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/18	6/1-9/30	Complete
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/16 - 12/31/18		Complete
	1/1/19 - 12/31/21		
	1/1/22 - 12/31/24		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Lead And Copper (PBCU)		1 routine	(RT) per six months
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	10/1/18 - 3/31/19		Complete

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Schedule Generation Date: 4/11/2019

	Connecticut Department of Public Health Drinking Water Section									
Water Quality Monitoring and Compliance Schedule										
PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source					
CT1020254	WOOD POND (WEST 1&2)	NTNC	70	Р	GW					

Connections

Residential Commercial Industrial

1

Combined

Agricultural

Service

Towns Served: NORTH STONINGTON

CCTS 2: DWS REVIEW & APPROVAL OF OCCT

CROSS CONNECTION SURVEY REPORT

Local Address (where applicable)

ROUTE 184

Towns Served: NORTH STONINGTON								
Monitori	ng Requirements							
Water System Facility: ENTRY POINT (WSF ID: 00700)								
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine (RT) per three year						
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status					
ENTRY POINT (3)	1/1/17 - 12/31/19	1/1/17 - 12/31/19						
	1/1/20 - 12/31/22							
Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine	(RT) per three years					
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status					
ENTRY POINT (3)	1/1/17 - 12/31/19							
	1/1/20 - 12/31/22							
Organic Chemicals (VOCS)		1 routine	(RT) per three years					
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status					
ENTRY POINT (3)	1/1/16 - 12/31/18		Complete					
	1/1/19 - 12/31/21							
	1/1/22 - 12/31/24							
Water Quality Parameters - Basic (WQP1)		2 routine	(RT) per three years					
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status					
ENTRY POINT (3)	1/1/16 - 12/31/18	6/1-9/30	Complete					
Other Com	pliance Schedules							
Compliance Schedule Activity	Due Date	Achieved D	ate					
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012							
CCTS 1: PWS TO RECOMMEND OCCT	1/16/2019							
SWTS 1: PWS TO RECOMMEND SOWT	1/16/2019							
LEAD PUBLIC EDUCATION CONSUMER DELIVERY	5/16/2019							
LEAD PUBLIC EDUCATION REPORT TO STATE	5/16/2019							
SWTS 2: DWS REVIEW & APPROVAL OF SOWT	12/31/2019							

	Water System Facility and Sampling Point Inventory										
Water					Total	Lead and					
System	Water System Facility	Sampling Point	Sampling Point		Coliform	Copper		Stage			
Facility ID)	ID	Description	Status	Rule	Rule Tier	Asbestos	WQP 2 DBF			
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ						
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α							
		NSP001	KITCHEN A	Α	Υ	1	Υ				
		NSP002	UTILITY SINK	Α	Υ	1					
		NSP003	LADIES ROOM	Α	Υ	1					
		NSP004	KITCHEN B	Α	Υ	1					
		NSP005	MENS ROOM	Α	Υ	1					
		UPSTREAM	WITHIN 5 SERVICE CON	Α							
00700	ENTRY POINT	3	ENTRY POINT	Α							

12/31/2020

3/1/2022

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source		
CT1020254 WOOD POND (WEST 1&2)					NTNC	70	Р	GW		
Local Address (where applicable) Service			Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural		
ROUTE 184 Connections					1					

Connecticut Department of Public Health Drinking Water Section

Towns Served: NORTH STONINGTON

	Water System Facility and Sampling Point Inventory									
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Coliform	Lead and Copper Rule Tier	Asbestos		stage DBPR	
10483	WELL B	2	WELL1	Α						
50498	WELL-X-TROL BLADDER STORAGE									

Water System Facility: DISTRIE	BUTION SYSTEM (WSF ID: 006	00)						
Facility Classification: SMALL WAT	ER SYSTEM		Certification					
Operator Name	Operator Type	Certification(s)	Expiration					
TOMASZEK, EDWARD S.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2019					
Contact Information								

Certified Operator Information

Name				Organization	1	Job Title			
Mr. Daniel Barber				Northeast Pr	roperty Group	Sr. Vice President			
Mailing Address Line One Mailing Add			Mailing Addr	ess Line Two			City	State	Zip Code
150 Eugene O'neill Dr						New Lor	idon	СТ	06320
Business Phone	Extension	Fax	Mo	bile Phone	Emergency Phone	Email Ac	Email Address		
860-437-7005			86	0-437-7070		dbarber@neproperty.com			
Contact Role(s): A	dministrative Co	ontact			•				
				0				1.1. +01	

Name				Organization		Job Title			
Mr. Thomas Contois				Pawcatuck Pr	operty Managemen	Vp / Reo Mngr			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
23 Road Street						Westerly	,	RI	02891
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Address			

Contact Role(s): Legal Contact

Please note the following:

- The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- If a Collection Period is specified, all water quality samples must be collected during the specified period.
- Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name Cla					ssification	Population	Owner Type	Primary Source
CT1020314 SECOND BAPTIST CHURCH					NTNC	70	Р	GW
Local Address (where applicable)		Service	Resider	ntial Commer		al Industri	al Combine	ed Agricultural
12 STILLMAN RO	Connections			1				

Towns Served: NORTH STONINGTON			
Monitoring Re	equirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)			
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
DISTRIBUTION SYSTEM (4)	1/1/14 - 12/31/22		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/20	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 re	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)			outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Connecti	cut Departme	nt of	Public H	ealth	Dı	rinking	g W	<i>l</i> ater	Section	1	
	W	ater Quality M	onit	oring and	d Con	npl	iance	Scł	nedul	е		
PWS ID	PWS Name					Clas	ssification	Pop	ulation	Owner Type	Pri	mary Source
CT102031	4 SECOND BAPT	TIST CHURCH					NTNC		70	Р		GW
Local Add	ress (where applicab	e)		Service	Residen	tial	Commerc	ial	Industria	l Combin	ed	Agricultural
12 STILLM	AN ROAD (ROUTE 49)		Connections			1					
Towns Ser	ved: NORTH STONIN	GTON								·		
		M	onit	oring Requ	ireme	nts	}					
Water Sy	stem Facility: EN 1	RY POINT (WSF ID: 0	0700)									
Organic	Chemicals (VOCS)									1 routine	(RT	「) per year
Samp	oling Point (Sampling	Point ID)			Monitori	ing P	Period (Colle	ction Per	iod Con	plia	nce Status
ENTR	Y POINT (3)				1/1/18 -		-					
					1/1/19 -		-					
					1/1/20 -	12/3	31/20					
		Oth	ner C	ompliance	Sched	lule	es					
Complian	ce Schedule Activity					Due	Date		Achie	ved Date		
SUBMIT L	EAD CONSUMER NOT	ICE CERTIFICATE			1	2/29	9/2013					
SUBMIT L	EAD CONSUMER NOT	ICE CERTIFICATE)/2015					
CROSS CO	NNECTION SURVEY F	EPORT				3/1/	2020					
		Public	c Not	ification R	equire	eme	ents					
			C	ompliance	Notice		<u>Public N</u>	Votifi	<u>cation</u>	PN C	Certij	<u>fication</u>
Violation/				Period	Tier		Required		erformed			Received
Organic Cl	nemicals M&R Violat			18 - 12/31/18	3		2/28/2020			3/9/202	20	
		Water System	Facili	ity and Sar	npling	Po	int Inve	ento	ory			
Water		_						otal		and		
System	Water System Facil			Sampling Poi	nt			liforr				Stage
Facility ID		ID		Description	LCVCTEN		Status	Rule	Kule	iler Asbest	05 V	NQP 2 DBPR
00600	DISTRIBUTION SYST		DE 4 4 4	DISTRIBUTION		-	A	Y				
				WITHIN 5 SER	VICE COI	N	A	.,	2			
		SB00		KITCHEN	117		A	Y	2			
		SB00		BOYS LEFT SIN			A	Y	2			
		SB00					A	Y Y	2			
		SB00 SB00		GIRLS LEFT SII			A A	Υ	2			
		UPSTR		WITHIN 5 SER		NI.	A	ĭ	2			
00700	ENTRY POINT	3	LAIVI	ENTRY POINT		N .	A					
21802	WELL	2		WELL			A					
54647				VVELL			A					
54047	BLADDER TANKS (2)		· C· 1				,					
-				Operator	Intorm	atı	on					
	,	TRIBUTION SYSTEM (WSF I	D: 00600)								
_	assification: SMALL		_								(Certification
Operator		Operat			ertificatio							Expiration
WILKINSO	N, PAMELA B.	CHIEF OF					SYSTEM O	PERA	TOR CON	NDITIONAL		6/30/2020
			Con	tact Inforr	nation							

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

N Stonington Christian Academy

Job Title

State

Zip Code

Director

City

Organization

Mailing Address Line Two

Name

Ms. Pamela B. Wilkinson

Mailing Address Line One

Connecticut Department of Public Health Drinking Water Section												
	Wat	ter Qual	ity M	onito	oring a	nd Cor	npli	ance S	Schedul	le		
PWS ID	PWS Name						Class	ification	Population	Owner Type	e Pr	imary Source
CT1020314	0314 SECOND BAPTIST CHURCH						N	ITNC	70	Р		GW
Local Address (w	cal Address (where applicable) Service Resid				Reside	ntial (Commerc	ial Industri	ial Combin	ned	Agricultural	
12 STILLMAN RO	AD (ROUTE 49)				Connection	ns		1				
	IORTH STONINGT	ON				·			·	·		
12 Stillman Koad	1		North Stonington C1 06359						06359			
Business Phon	e Extension	Fax	Mobile Phone Emergency Phone Email Address									
860-599-5071	L	860-599-2	815 860-599-3552 NSCAPBW@sbcglobal.net									

CD 1-11 - 11 - 1/1- D -1 -1 1 - - 1/1-1 - C

Contact Role(s): Administrative Contact, Legal Contact

- Please note the following:
- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT1021063	KIDDS & CO., LLC				NTNC	78	Р	GW
Local Address (v	vhere applicable)	Service	Residen	itial	Commercia	al Industri	al Combine	ed Agricultural
172 PROVIDENC	E NEW LONDON TPKE	Connections			1			

Towns Served: NORTH STONINGTON			
Monitoring	g Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00	600)		
Asbestos (1094)		1 routine	e (RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/20	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT1021063	KIDDS & CO., LLC				NTNC	78	Р	GW
Local Address (where applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
172 PROVIDEN	CE NEW LONDON TPKE	Connections			1			

Towns Served: NORTH STONINGTON

Other Com	npliance Schedules	
Compliance Schedule Activity	Due Date	Achieved Date
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2018	
CROSS CONNECTION SURVEY REPORT	3/1/2020	

	Wa	iter System Facili	ity and Sampling P	oint Ir	nvento	ry		
Water System Facility IL	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	Stage WQP 2 DBPF
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	Α				
		ACTIVIT	ACTIVITY WASH SINK	Α	Υ			
		ACTIVITIES	WASH SINK	Α	Υ	2		
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		PRESCHL	PRESCHOOL WASH SINK	Α	Υ			
		PRESCHOOL	WASH SINK	Α	Υ	2		
		STAFFKIT	KIT SINK	Α	Υ	2		
		STAFFKT	STAFF KITCHEN SINK	Α	Υ			
		TODDLERN	WASH SINK	Α	Υ	2		
		TODDLERS	WASH SINK	Α	Υ	2		
		TODDLRN	TODDLER WASH SINK	Α	Υ			
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
54579	WELL 1	2	WELL 1	Α				
54583	TREATMENT PLANT							
54585	PRESSURE TANK							

Certified Operator Information Water System Facility: TREATMENT PLANT (WSF ID: 54583) Facility Classification: CLASS 1 TREATMENT PLANT Operator Name Operator Type Certification(s) KLOBUKOWSKI, STEVEN J. CHIEF OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS III 6/30/2020 WATER TREATMENT PLANT OPERATOR - CLASS IV 6/30/2019 Contact Information

			Co	ontact Inf	ormation				
Name				Organization	1			Job Title	
Ms. Christine Hare Kidds & Co., LLC. Director									
Mailing Address Lin	e One		Mailing Addr	ng Address Line Two City				State	Zip Code
172 Providence Nev	v London Turr	npike				North St	onington	СТ	06359
Business Phone	Extension	Fax	Mo	bile Phone	Emergency Phone	Email Ad	dress		
860-535-9999		860-245-	5859		860-535-9266	christine@kiddsandco.com			
Contact Role(s): A	dministrative	Contact, Leg	gal Contact, O	wner					

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

	water quality 1.10111t	or mg am	u doll	P	ilulice t	ciicaai		
PWS ID PWS Name C				Classification		Population	Owner Type	Primary Source
CT1021063	KIDDS & CO., LLC	NTNC		78	Р	GW		
Local Address (v	Local Address (where applicable) Servi			itial	Commerci	al Industri	al Combine	ed Agricultural
172 PROVIDENC	Connections			1				
Towns Served: I	NORTH STONINGTON							

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT1021073	411C NORWICH WESTERLY RD				NTNC	100	Р	GW
Local Address (where applicable)		Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
411C NORWICH	Connections					1		

Towns Served: NORTH STONINGTON			1
Monitoring R	equirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600))		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/20	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: TREATMENT PLANT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 re	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Connecticut De	partmen	t of	Public H	ealth D	rinki	ng V	Vater S	ection	
	Water O	uality Mo	onit	oring and	d Comr	olianc	e Scl	nedule		
PWS ID	PWS Name	<i>J</i>		0					wner Type Pri	mary Source
CT1021073	411C NORWICH WESTER	LY RD				NTNC		100	Р	GW
Local Address (where applicable)			Service	Residentia	I Comm	ercial	Industrial	Combined	Agricultural
411C NORWICH	H WESTERLY ROAD			Connections					1	
Towns Served:	NORTH STONINGTON									
		M	onite	oring Requ	irement	ts				
Water System	Facility: TREATMENT	PLANT (WSF	ID: 0	0700)						
Organic Cher	nicals (VOCS)							1 rc	outine (RT) p	er quarter
Sampling	Point (Sampling Point ID)				Monitoring		Colle	ction Perio	d Complia	ince Status
					7/1/19 - 9/	/30/19				
Water System	Facility: WELL #1 (WS	F ID: 57817)								
E. Coli (3014)							1 rc	outine (RT) p	er quarter
Sampling	Point (Sampling Point ID)			1	Monitoring	Period	Colle	ction Perio	d Complia	ince Status
WELL #1 (2)				.0/1/18 - 12					nplete
					1/1/19 - 3/				Cor	nplete
					4/1/19 - 6/					
					7/1/19 - 9/					
		Oth	er C	ompliance	Schedu	les				
Compliance Scl	nedule Activity				Du	e Date		Achieve	d Date	
SUBMIT LEAD (CONSUMER NOTICE CERTIF	ICATE			9/2	8/2012				
SUBMIT LEAD O	CONSUMER NOTICE CERTIF	ICATE			3/3	1/2013				
RESPOND TO SA	ANITARY SURVEY					5/2017				
CROSS CONNEC	CTION EXEMPTION				3/1	1/2022				
		Public	Not	ification R	equiren	nents				
			C	ompliance	Notice		c Notif		<u>PN Certi</u>	
Violation/Situa	ition		. / .	Period	Tier	Requir		erformed	Due to DPH	Received
E. Coli				/17 - 6/30/17	3	8/15/20			8/25/2018	
	Wate	r System F	acili	ity and San	npling P	oint In	vent	ory		
Water	on Conton Facility	Causalina	Daint	Committee Dair	.4		Total			
System Wat Facility ID	er System Facility	Sampling ID	Point	Sampling Poir Description	Ιτ		Colifori Rule		er Asbestos I	Stage
	RIBUTION SYSTEM	4		DISTRIBUTION	LSVSTEM	Status A	Y	Nuic Tie	.i Assestes	VQI Z DDI K
00000 2131	MIDOTION STSTEM	DOWNSTI	REAM			A	•			
		PW1		PW 1	VICE COIN	A	Υ			
		PW2		PW2		A	Y			
		PW3		PW3		A	Y			
		PW4		PW4		A	Υ			
		PW5		PW5		Α	Υ			
		UPSTRE		WITHIN 5 SER	VICE CON	Α				
00700 TRE	ATMENT PLANT	3		ENTRY POINT		Α				

Certified Operator Information

Water System Facility: TREATMENT PLANT (WSF ID: 00700)

Facility Classification: CLASS 1 TREATMENT PLANT

57817 WELL #1

Operator Name Operator Type

Certification
Certification(s)
Expiration

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

WELL #1

	Water Quality Mo	nitoring and	d Con	npl	liance S	Schedul	e	
PWS ID PWS Name					ssification	Population	Owner Type	Primary Source
CT1021073	411C NORWICH WESTERLY RD				NTNC	100	Р	GW
Local Address (where applicable) Service Reside				ntial	Commerci	al Industri	al Combine	ed Agricultural
411C NORWICH WESTERLY ROAD Connections							1	

Cartified Operator Information

Connecticut Department of Public Health Drinking Water Section

Towns Served: NORTH STONINGTON

			certified Opera	toi iiiioiiiiatioi	•						
Water System Fac	cility: TREAT	MENT PLA	ANT (WSF ID: 00700)								
Facility Classification	on: CLASS 1 TR	EATMENT F	PLANT					Certification			
Operator Name			Operator Type	ype Certification(s)							
CHARNETSKI, MICH	AEL R.		CHIEF OPERATOR	DISTRIBUTION SYS	TEM OPE	RATOR - CLAS	S III	6/30/2020			
				WATER TREATMEN	IT PLANT	OPERATOR -	CLASS IV	6/30/2021			
			Contact In	formation							
Name			Organizatio	n			Job Title				
Ms. Tia May-McCal	l Inc.		Pollywogs (Child Dev. Center		Director/Ow	ner				
Mailing Address Lin	e One		Mailing Address Line Two	0		City	State	Zip Code			
66 Coal Pit Hill Road	t				Griswold		СТ	06351			
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Ad	ldress					
860-535-1174				401-474-5915	tmay482	@att.net					
Contact Role(s): A	dministrative (Contact, Leg	gal Contact, Owner								

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source
CT1021103	QUINLAN ENTERPRISE BUILDING				NTNC	46	Р	GW
Local Address (where applicable)		Service	Residen	ntial	Commercia	al Industri	al Combine	ed Agricultural
75 FRONTAGE R	D	Connections			1			

uirements				
	1 routine	(RT) per nine years		
Monitoring Period	Collection Period	Compliance Status		
		Complete		
1/1/19 - 12/31/27		•		
	1 rout	ine (RT) per quarter		
Monitoring Period	Collection Period	Compliance Status		
10/1/18 - 12/31/18		Complete		
1/1/19 - 3/31/19		Complete		
4/1/19 - 6/30/19				
7/1/19 - 9/30/19				
	5 routine	(RT) per six months		
Monitoring Period	Collection Period	Compliance Status		
7/1/18 - 12/31/18		Complete		
1/1/19 - 6/30/19				
7/1/19 - 12/31/19				
	1 rout	ine (RT) per quarter		
Monitoring Period	Collection Period	Compliance Status		
10/1/18 - 12/31/18		Complete		
1/1/19 - 3/31/19		Complete		
4/1/19 - 6/30/19				
7/1/19 - 9/30/19				
	1 routine	(RT) per three years		
Monitoring Period	Collection Period	Compliance Status		
		Complete		
1/1/20 - 12/31/22				
	1 r	outine (RT) per year		
	Collection Period	Compliance Status		
		Complete		
1/1/20 - 12/31/20				
		ine (RT) per quarter		
	Collection Period	Compliance Status		
		Complete		
		Complete		
7/1/19 - 9/30/19				
	1 rout	ine (RT) per quarter		
Monitoring Period 10/1/18 - 12/31/18	Collection Period	Compliance Status Complete		
	Monitoring Period 10/1/18 - 12/31/18 1/1/19 - 3/31/19 4/1/19 - 6/30/19 7/1/19 - 9/30/19 Monitoring Period 7/1/18 - 12/31/18 1/1/19 - 6/30/19 7/1/19 - 12/31/19 Monitoring Period 10/1/18 - 12/31/18 1/1/19 - 3/31/19 4/1/19 - 6/30/19 7/1/19 - 9/30/19 Monitoring Period 1/1/17 - 12/31/19 1/1/20 - 12/31/22	1 routine Collection Period 1/1/10 - 12/31/18 1/1/19 - 12/31/27 1 routine Collection Period 10/1/18 - 12/31/18 1/1/19 - 3/31/19 4/1/19 - 6/30/19 7/1/19 - 12/31/18 1/1/19 - 12/31/18 1/1/19 - 3/31/19 1 routine Collection Period Collection Period Collection Period Toutine Collection Period Collection Period 10/1/18 - 12/31/18 1/1/19 - 3/31/19 1 routine Collection Period Collection Period 1/1/19 - 9/30/19 Toutine Collection Period 1/1/19 - 9/30/19 Toutine Collection Period 1/1/17 - 12/31/19 1/1/20 - 12/31/19 1/1/20 - 12/31/19 1/1/20 - 12/31/19 1/1/20 - 12/31/20 1 routine Collection Period 1/1/18 - 12/31/18 1/1/19 - 12/31/19 1/1/20 - 12/31/20 1 routine Collection Period 1/1/18 - 12/31/18 1/1/19 - 3/31/19 1/1/20 - 12/31/18 1/1/19 - 3/31/19 1/1/20 - 12/31/18 1/1/19 - 3/31/19 1/1/20 - 12/31/18 1/1/19 - 3/31/19 1/1/19 - 9/30/19 1/1/19 -		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

						1				
PWS ID	PWS Name					Cla	ssification	Population	Owner Type	Primary Source
CT1021103	QUINLAN ENTERPRIS	E BUILDI	ING				NTNC	46	Р	GW
Local Address (where applicable)			Service	Residen	ntial Commerc		al Industri	al Combine	ed Agricultural	
75 FRONTAGE R	.D			Connections			1			

Towns Served: NORTH STONINGTON

	Monitoring Requirements	
Water System Facility:	ENTRY POINT (WSF ID: 00700)	
Organic Chemicals (Vo	OCS)	1 routine (R

rganic Chemicais (VOCS)	ine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date

CROSS CONNECTION SURVEY REPORT 3/1/2020

			- /	,							
	Water System Facility and Sampling Point Inventory										
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	Stage WQP 2 DBPR			
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α							
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α							
		UPSTREAM	WITHIN 5 SERVICE CON	Α							
00700	ENTRY POINT	3	ENTRY POINT	Α							
60904	WELL #1	2	WELL #1	Α							

Certified Operator Information

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

	Facility Classification: SMALL WATER SYST	TEM		Certification
	Operator Name	Operator Type	Certification(s)	Expiration
STEWART, MICHAEL J. CHIEF OPERATOR		DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2019	
			WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2019

WATER TREATMEN					I I LANII I	OI LIVATOR	CLA33 I	0/30/2013			
Contact Information											
Name				Organization	1	Job Title					
Mr. Jason Quinlan				Quinlan Enterprises							
Mailing Address Line One Mailin			Mailing Addr	g Address Line Two			City	State	Zip Code		
152 Wheele			152 Wheeler	Rd Stoning			on	СТ	06378		
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Address					
860-460-6987					860-857-5032	jquinlan@hitechprofiles.com					

Contact Role(s): Administrative Contact, Legal Contact, Owner

Please note the following:

60906

BLADDER TANK

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT1021113 JONATHAN EDWARDS WINERY				NTNC	25	Р	GW	
Local Address (where applicable)		Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
74 CHESTER MAINE RD		Connections			1			

Towns Served: NORTH STONINGTON			I
	Poquiromonts		
	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600	u)	1	(DT) man mina wasan
Asbestos (1094) Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	(RT) per nine years Compliance Status
Select from Inventory of Active Sampling Points	1/1/10 - 12/31/18		Complete
, , ,	1/1/19 - 12/31/27		·
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per six months
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/18 - 12/31/18		Complete
	1/1/19 - 6/30/19		
	7/1/19 - 12/31/19		
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 re	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19	1/1-12/31	Waiver
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Water Quality Monitoring and Compliance Schedule											
PWS ID	WS ID PWS Name			Cla	ssification	Population	Owner Type	Primary Source			
CT1021113 JONATHAN EDWARDS WINERY					NTNC	25	Р	GW			
Local Address (where applicable)		Service	Residen	itial Commerc		al Industri	al Combine	ed Agricultural			
74 CHESTER MAINE RD		Connections			1						

Connecticut Department of Public Health Drinking Water Section

Towns Served: NORTH STONINGTON

Monitoring Requirements										
Water System Facility: ENTRY POINT (WSF ID: 00700)										
Organic Chemicals (VOCS)		1 routine (RT) per quarter								
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status							
	1/1/19 - 3/31/19		Complete							
	4/1/19 - 6/30/19									
	7/1/19 - 9/30/19									
Oth an Caman	lianaa Cabadulaa									

Other Compliance Schedules

Compliance Schedule Activity

Due Date

Achieved Date

CROSS CONNECTION SURVEY REPORT 3/1/2019

	Water System Facility and Sampling Point Inventory									
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos		Stage 2 DBPR	
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ					
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α						
		UPSTREAM	WITHIN 5 SERVICE CON	Α						
00700	ENTRY POINT	3	ENTRY POINT	Α						
60915	WELL #1	2	WELL #1	Α						

			C	ontact Inf	ormation				
Name Mr. Johnathan Edwards				Organization Edwards Wines LLC			Job Title		
Mailing Address Line One Mailing Add				ress Line Two			City	State	Zip Code
75 Cheste				Maine Rd		North Stonington CT		06359	
Business Phone	Extension	Fax	M	obile Phone	Emergency Phone	Email Address			
860-535-0202					860-984-3026	jonedwards@jedwardswinery.com			m
Contact Role(s): A	dministrative C	Contact	,		1				
Name				Organization	1	Job Title			
Mr. Robert D. Edwards				Edwards Real Estate LLC					
Mailing Address Line One Mailing Address Line One 32 Broadleat				dress Line Two		City		State	Zip Code
				Trail		Malvern		PA	19355
Business Phone	Extension	Fax M		obile Phone	Emergency Phone	Email Address			

Contact Role(s): Legal Contact

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule